SO 4.3: Assure that specialized services recommended by the Pre-Admission Screening and Resident Review process are initiated in a timely manner.

**Evelyn Perez Assistant Secretary Developmental Disabilities Administration** 

## **Clarify the Problem**

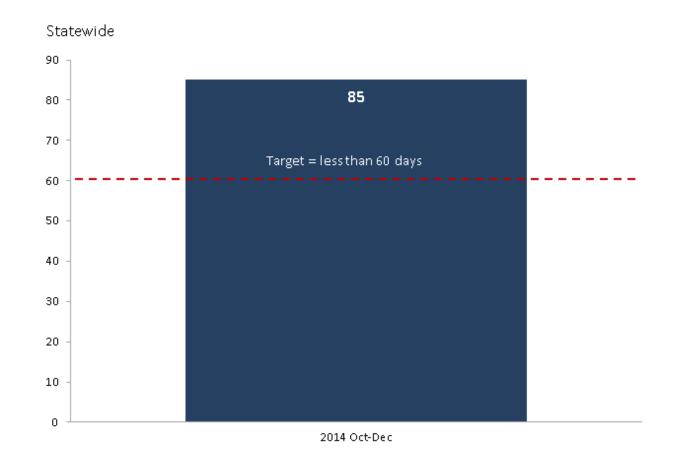
Pre-Admission Screening and Resident Review (PASRR) specialized services are provided to individuals with intellectual disabilities or related conditions who are receiving nursing facility care. Historically specialized services have often taken several months to initiate. These services are in addition to services provided by the nursing facility and help individuals maintain functional skills and their connection with the community.

#### **Breakdown the Problem**

- Developmental Disabilities Administration (DDA), Hospital and Nursing Facility staff did not understand the requirements or intent of PASRR
- There was no reliable data system to track the provision of specialized services
- There was no designated funding source for the provision of specialized services

#### **Target Setting**

Success Measure: Success Measure: Ensure specialized services recommended by the Pre-Admission Screening and Resident Review process are initiated from an average of 85 days in October through December 2014 to within an average of 60 days from the time of recommendation in July 2017.



<b>Identify Root Cause</b>	Why aren't specialized services authorized within 60 days?								
	Inadequate data tracking	Inconsistent training	Quality Assurance						
	Paper forms used	Hospital staff unclear on their responsibilities to refer the individual	No standardized quality oversight						
	No automated reports	DDA Nursing Facilities Staff out of compliance	No dedicated PASRR Quality Assurance Staff						
	No designated staff to monitor the data	DDA staff without adequate tools, training or funding to administer the program							
		DDA staff unclear about responsibilities for clients in Nursing Facilities							

#### **Proposed Countermeasures**

ID #	Root Cause	Proposed Countermeasures	Difficulty	Impact
1	Paper forms used and no automated reports	Convert to automated data management system	Med	High
2	No designated staff to monitor the data	Hire Program Manager and Specialist	Low	High
3	Hospital staff unclear on their responsibilities	Partner with state agencies to provide ongoing	Med	High
4	Nursing Facilities Staff out of compliance	training	N/a d	Himb
			Med	High
5	DDA staff without tools, training or funding	Improve forms, manual, staff training, request funding	High	High
6	No standardized quality oversight	Develop a Quality Assurance tool	High	High
7	No dedicated PASRR QA staff	Create PASRR QA unit	High	High

Prop	osed Action				
ID#	Task(s) to ID# Strategy/ Approach support strategy		Lead	Due	Expected Outcome
1	Convert to automated data management system	7/31/201		7/31/2015	Improved ability to monitor processes, timeliness and service delivery
2	Create PASRR unit	Hire Program Manager and Specialist	Terry Hehemann	12/1/2014	Improved ability to monitor for quality, timeliness and accessible data.
3 & 4	Partner with state agencies	Provide ongoing training	Terry Hehemann	6/30/2017	Improved compliance with code of federal regulations
5	Improve tools and staff training	Develop new forms and manual	Terry Hehemann	6/30/2017	Improved ability to monitor for quality, timeliness and accessible data.
6	Deploy two QA tools	Create tools	Larita Paulsen	7/1/2015	Improved ability to monitor trends and areas requiring quality improvement
7	Create QA PASSR unit	Hire QA specialists	Larita Paulsen	2/15/2015	Improved ability to monitor for quality and provide technical expertise

#### **Evaluate Results, Standardize, then Repeat**

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#### **Background**

Group Topic / Strategic Plan Goal / Main idea: Facility-based - Provide facility-based residential services for individuals.

Sub Topic / Strategic Objective: Assure that specialized services recommended by the Pre-Admission Screening and Resident Review process are initiated in a timely manner.

Measure # / Strategic Objective # : 4.4

Measure / Strategic Objective Title: Success Measure: Ensure specialized services recommended by the Pre-Admission Screening and Resident Review process are initiated from an average of 85 days in October through December 2014 to within an average of 60 days from the time of recommendation in July 2017.

## **Type of Status Report**

Strategic Plan

## **Proposed Action**

	Problem to be							
ID#	solved	Strategy/Approach	Task(s) to support strategy	Lead	Status	Due	Expected Outcome	Partners
1	Paper forms used and no automated reports	Convert to automated data management system	Complete data migration	Terry Hehemann	In process	7/31/2015	Improved ability to monitor processes, timeliness and service delivery	DDA IT staff
2	No designated staff to monitor the data	Create PASRR unit	Hire Program Manager and Specialist	Terry Hehemann	Completed	12/1/2014	Improved ability to monitor for quality, timeliness and accessible data.	DDA Management
4	Hospital staff unclear on their responsibilities  Nursing Facilities  Staff out of compliance	Partner with state agencies	Training regarding Level 1 form and roles and responsibilities of hospitals and nursing facilities. Provide ongoing training and partnering with Residential Care Services (RCS) for better compliance monitoring of Nursing Facilities.	Terry Hehemann	In process	8/30/2015	Improved compliance with code of federal regulations.	DSHS Residential Care Services, DSHS Behavioral Health and Service Integration Administration, DSHS Home and Community Services, Health Care Administration, Hospitals, Nursing Facilities
5	DDA staff without Improve tools and staff adequate tools, training or funding		Develop new automated forms	Terry Hehemann	Completed	4/27/2015	Improved ability to monitor for quality, timeliness and accessible data.	DDA IT Staff and QA Unit
			Create online user manual	Terry Hehemann	Completed	4/27/2015	Improve the quality and timeliness of assessments.	PASRR Manager and QA Manager
			Training on quality assurance tool and expectations	Terry Hehemann	Ongoing	8/30/2015	Improve the quality and timeliness of assessments.	PASRR Manager and QA Manager
		Receive additional funding	Request additional funding	Terry Hehemann	In progress	6/30/2015	Legislature will fund additional PASRR specialized services.	Legislature and Management Services Division
6	No standardized quality oversight	Create a monitoring tool for community and nursing homes	Pilot monitoring tool in the field and make final changes	Larita Paulsen	In process	7/1/2015	Improved ability to monitor trends and areas requiring quality improvement.	QA Unit
		Create a file review tool	Deploy file review tool	Larita Paulsen	Completed	5/1/2015	Improved ability to monitor trends and areas requiring quality improvement.	QA Unit
7	No dedicated PASRR Quality Assurance staff	Create PASRR Quality Assurance unit	Hire 3 Quality Assurance Specialists	Larita Paulsen	Completed	2/15/2015	Improved ability to monitor for quality and provide technical expertise.	DDA Management



**Background** 

Group Topic / Strategic Plan Goal / Main idea: Facility-based - Provide facility-based residential services for individuals.

Sub Topic / Strategic Objective: Assure that specialized services recommended by the Pre-Admission Screening and Resident Review process are initiated in a timely manner.

Measure # / Strategic Objective # : 4.3

**Action Tracker · Status Report** 

Measure / Strategic Objective Title: Ensure specialized services recommended by the Pre-Admission Screening and Resident Review process are initiated from an average of 85 days in October through December 2014 to within an average of 60 days from the time of recommendation in July 2017.

**Type of Status Report** 

Quarterly Status Report

Last modified 2/26/2016

# **Proposed Action**

ID #	Problem to be solved	Strategy/Approa ch	Task(s) to support strategy	Intention for strategy	Lead	Status	Due	Expected Outcome	Partners
1	Paper forms used and no automated reports	Convert to automated data management system	Complete data migration		Terry Hehemann	Completed	7/31/20 15	Improved ability to monitor processes, timeliness and service delivery	DDA IT staff
2	No designated staff to monitor the data	Create PASRR unit	Hire Program Manager and Specialist		Terry Hehemann	Completed	12/1/20 14	Improved ability to monitor for quality, timeliness and accessible data.	DDA Management
3	Hospital staff unclear on their responsibilities	Partner with state agencies	Training regarding Level 1 form and roles and responsibilities of hospitals and nursing facilities. Provide ongoing		Terry Hehemann	In process	3/31/20 16	Improved compliance with code of federal regulations.	DSHS Residential Care Services, DSHS Behavioral Health and Service
4	Nursing Facilities Staff out of compliance		training and partnering with Residential Care Services (RCS) for better compliance monitoring of Nursing Facilities. Develop new webinar. Continued local outreach.						Integration Administration, DSHS Home and Community Services, Health Care Administration, Hospitals, Nursing Facilities
5	•	Improve tools and staff training	A. Develop new automated forms		Terry Hehemann	Completed	4/27/20 15	Improved ability to monitor for quality, timeliness and accessible data.	DDA IT Staff and QA Unit
			B. Create online user manual		Terry Hehemann	Completed	4/27/20 15	Improve the quality and timeliness of assessments.	PASRR Manager and QA Manager
			C. Training on quality assurance tool and expectations. Scheduling Go-To-Meeting		Terry Hehemann	In Progress	3/31/20 16	Improve the quality and timeliness of assessments.	PASRR Manager and QA Manager
		Receive additional funding	Request additional funding		Terry Hehemann	Completed	6/30/20 15	Legislature will fund additional PASRR specialized services. State plan amendment approved.	Legislature and Management Services Division

		Strategic Plan 2015-2017	2015 Q1	Q2	Q3	Q4	2016 Q1	Q2	Q3	Q4	2017 Q1	Q2
	~	Assure that specialized services recommended by the Pre-Admission Screening and Resident Review (PASRR) process are initiated in a timely manner.										
	SO 4.3	<b>Success Measure 4.3.1</b> : Ensure specialized services recommended by the PASRR process are initiated from an average of 85 days in October through December 2014 to within an average of 60 days from the time of recommendation in July 2017.										



January 2016

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Developmental Disabilities Administration

# Action Tracker · Status Report |

**Background** 

Group Topic / Strategic Plan Goal / Main idea: Facility-based - Provide facility-based residential services for individuals.

Sub Topic / Strategic Objective: Assure that specialized services recommended by the Pre-Admission Screening and Resident Review process are initiated in a timely manner.

Measure # / Strategic Objective # : 4.3

Measure / Strategic Objective Title: Ensure specialized services recommended by the Pre-Admission Screening and Resident Review process are initiated from an average of 85 days in October through December 2014 to within an average of 60 days from the time of recommendation in July 2017.

**Type of Status Report** 

Quarterly Status Report

Last modified 2/26/2016

# **Proposed Action**

1C #		Strategy/Approa ch	Task(s) to support strategy	Intention for strategy	Lead	Status	Due	Expected Outcome	Partners
6	No standardized quality oversight	A. Create a monitoring tool for community nursing homes	Pilot monitoring tool in the field and make final changes		Larita Paulsen	Completed	7/1/201 5	Improved ability to monitor trends and areas requiring quality improvement.	QA Unit
		B. Monitor community nursing homes	Identify high priority nursing facilities to visit. Goal to visit 2 per week		Larita Paulsen	In progress	3/31/20 16	Improved ability to monitor trends and areas requiring quality improvement.	QA Unit
		C. Create and implement Respite Stay monitor tool	Review 100% respite stays		Larita Paulsen	In progress	3/31/20 16	Improved ability to monitor trends and areas requiring quality improvement.	QA Unit
		Create a file review tool	Deploy file review tool		Larita Paulsen	Completed	5/1/201 5	Improved ability to monitor trends and areas requiring quality improvement.	QA Unit
7	No dedicated PASRR Quality Assurance staff	Create PASRR Quality Assurance unit	Hire 3 Quality Assurance Specialists		Larita Paulsen	Completed	2/15/20 15	Improved ability to monitor for quality and provide technical expertise.	DDA Management

	Strategic Plan 2015-2017	2015 Q1	Q2	Q3	Q4	2016 Q1	Q2	Q3	Q4	2017 Q1	Q2
Assure that specialized services recommended by the Pre-Admission Screening and Resident Review (PASRR) process are initiated in a timely manner.											
	Success Measure 4.3.1: Ensure specialized services recommended by the PASRR process are initiated from an average of 85 days in October through December 2014 to within an average of 60 days from the time of recommendation in July 2017.										